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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF IOWA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Eric First name Joseph Middle name Molitor Last name and Suffix (Sr., Jr., II, III)	Chelsee First name Renae Middle name Molitor Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		FKA Chelsee Renae Patchett FKA Chelsee Renae Followill
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3156	xxx-xx-0354

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Debtor 1 Eric Joseph Molitor
Debtor 2 Chelsee Renae Molitor

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	410 N. Lincoln St	If Debtor 2 lives at a different address:		
		Knoxville, IA 50138 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Marion			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:	Check one:		
	ранкі прісу	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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_							
Part	Tell the Court About Y	our Bar	nkruptcy Cas	se .			
7.	The chapter of the Bankruptcy Code you are			. (For a brief description of each, see <i>Notice Required by 11 U.S.C.</i> § 342(b) for <i>Individuals Filing for Bankruptcy</i> 0)). Also, go to the top of page 1 and check the appropriate box.			
	choosing to file under	■ Cha	pter 7				
		☐ Cha	pter 11				
		☐ Cha	pter 12				
		☐ Cha	pter 13				
8.	How you will pay the fee	a	bout how you	ı may pay. Typi ıttorney is subn	ically, if you are paying the fee yo	k with the clerk's office in your local court for more courself, you may pay with cash, cashier's check, or ralf, your attorney may pay with a credit card or chec	noney
			need to pay	the fee in inst	allments. If you choose this optic	on, sign and attach the Application for Individuals to	Pay
			-		s (Official Form 103A).		
		b	ut is not requ	ired to, waive y	our fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge ur income is less than 150% of the official poverty li n installments). If you choose this option, you must f	ne tha
						ial Form 103B) and file it with your petition.	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business	■ No					
	partner, or by an affiliate?						
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No.	Go to lir	ne 12.			
	residence?	Yes.	Has you	ır landlord obta	ined an eviction judgment agains	t you?	
		. 20.		No. Go to line 1	12.		
			_			Judgment Against You (Form 101A) and file it with t	nis

Debtor 1 Eric Joseph Molitor

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	otor 2 Chelsee Renae M		Case number (if known)			
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to Part 4.			
		Yes.	Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Mow-Litor & More Name of business, if any			
	If you have more than one		410 N. Lincoln St Knoxville, IA 50138			
	sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code			
	it to this petition.		Check the appropriate box to describe your business:			
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
			Stockbroker (as defined in 11 U.S.C. § 101(53A))			
			Commodity Broker (as defined in 11 U.S.C. § 101(6))			
			None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approped deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemes operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proced in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankru Code.	ptcy		
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy (Code.		
Par	t 4: Report if You Own or	· Have Anv	Hazardous Property or Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?			
	public health or safety? Or do you own any property that needs		If immediate attention is needed, why is it needed?			
	immediate attention?		needed, why is it needed:			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
			Number, Street, City, State & Zip Code			

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Debtor 1	Eric Joseph Molitor		
Debtor 2	Chelsee Renae Molitor	Case number (if known)	
		•	

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-02411-als7 Doc 1 Filed 10/14/19 Entered 10/14/19 17:58:17 Desc Main Document Page 6 of 58

	tor 1 Eric Joseph Molit tor 2 Chelsee Renae M				Case no	umber (if known)		
Par	t 6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?		Are your debts primarily consindividual primarily for a personal No. Go to line 16b.			e defined in 11 U.S.C.	§ 101(8) as "incurred by an	
			Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain					
			money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. -	State the type of debts you owe	that are not consu	mer debts or bu	siness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do gare paid that funds will be availa				and administrative expenses	
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000)	□ 25,001-	-50,000	
		□ 50-99		☐ 5001-10,00		☐ 50,001-		
		☐ 100-19 ☐ 200-99		□ 10,001-25,0	000	☐ More tr	an100,000	
19.	How much do you	\$ 0 - \$5	0.000	□ \$1,000,001	- \$10 million	□ \$500,00	00,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,001 - \$100,000			☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		000,001 - \$10 billion	
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million			1 - \$100 million 01 - \$500 millior		0,000,001 - \$50 billion aan \$50 billion	
20.	How much do you	□ \$0 - \$5	0,000	□ \$1,000,001	- \$10 million	□ \$500,00	00,001 - \$1 billion	
	estimate your liabilities to be?	\$50,001 - \$100,000		\$10,000,00			0,000,001 - \$10 billion	
			01 - \$500,000 01 - \$1 million		1 - \$100 million 01 - \$500 millior		0,000,001 - \$50 billion han \$50 billion	
Par	17: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
			hosen to file under Chapter 7, I attes Code. I understand the relie					
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out to document, I have obtained and read the notice required by 11 U.S.C. § 342(b).			nelp me fill out this					
		I request r	relief in accordance with the cha	pter of title 11, Unit	ed States Code	, specified in this petit	ion.	
			nd making a false statement, co y case can result in fines up to \$					
		/s/ Eric J	loseph Molitor			Renae Molitor		
			eph Molitor of Debtor 1		Chelsee Res Signature of D			
		Executed	on October 14, 2019		Executed on	October 14, 2019	•	
			MM / DD / YYYY			MM / DD / YYYY		

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		tage 1 of 30			
Debtor 1 Eric Joseph M Chelsee Rena		Case number (if known)			
For your attorney, if you a represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	d States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented an attorney, you do not no to file this page.		and, in a case in which § 707(b)(4)(D) applies, certify that I have no know			
	/s/ Michael L. Jankins	Date	October 14, 2019		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Michael L. Jankins AT0003918				
	Printed name				
	Jankins Law Firm				
	Firm name				
	700 2nd Ave. Suite 103				
	Des Moines, IA 50309				
	Number, Street, City, State & ZIP Code				
	Contact phone 515-255-1855	Email address	mikej572@hotmail.com		
	AT0003918 IA				
	Bar number & State				

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Fill in this inform	nation to identify your	case:	<u> </u>	
Debtor 1	Eric Joseph Molit	or		
	First Name	Middle Name	Last Name	
Debtor 2	Chelsee Renae M	olitor		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA	
Case number _				☐ Check if this is an
(ii kilowii)				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your assets Value of what you own		
		value o	What you own	
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00	
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	16,069.00	
	1c. Copy line 63, Total of all property on Schedule A/B	\$	16,069.00	
Pa	t 2: Summarize Your Liabilities			
		Your lia	abilities you owe	
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00	
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00	
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	60,385.00	
	Your total liabilities	\$	60,385.00	
Pai	t 3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,453.00	
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,052.00	
Pai	t 4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?			
0.	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.	
	■ Yes			
7.	What kind of debt do you have?			

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 2	Chelsee Renae Molitor	Case number (if known)	
	n the <i>Statement of Your Current Monthly Income</i> : Cop A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Li		\$ 4,565.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Eric Joseph Molitor

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Document P	age 10 of 58		
Fill in this infor	mation to identify your case a	nd this filing:			
Debtor 1	Eric Joseph Molitor				
	First Name	Middle Name La	ast Name		
Debtor 2 (Spouse, if filing)	Chelsee Renae Molitor First Name	Middle Name La	ast Name		
			ist rame		
United States Ba	ankruptcy Court for the: SOUT	HERN DISTRICT OF IOWA			
Case number					☐ Check if this is an
					amended filing
Official Fo	orm 106A/B				
Schedul	le A/B: Property	/			12/15
	separately list and describe items.				
	Be as complete and accurate as po re space is needed, attach a separ				
Inswer every que			p or any additional page.	o, witho your name and odo	, manibor (ii kirown).
Part 1: Describe	Each Residence, Building, Land,	or Other Real Estate You Own o	or Have an Interest In		
	-				
. Do you own or	have any legal or equitable interes	st in any residence, building, lar	d, or similar property?		
No. Go to Pa	rt 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
□ No ■ Yes				Do not do dost o como do la	Dut.
3.1 Make:	Dodge	Who has an interest in the pr	operty? Check one	Do not deduct secured cl the amount of any secure	ed claims on Schedule D:
Model:	Ram 1500	Debtor 1 only		Creditors Who Have Clair	ms Secured by Property.
-	1998 te mileage: 150,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
Other infor	, <u>, , , , , , , , , , , , , , , , , , </u>	☐ At least one of the debtors		chare property.	portion you own.
		_		\$1,400.00	\$1,400.00
		☐ Check if this is communit (see instructions)	y property	φ1,400.00	φ1,400.00
3.2 Make:	Pontiac	Who has an interest in the pr	operty? Check one	Do not deduct secured cl the amount of any secure	
Model:	G6	Debtor 1 only		Creditors Who Have Clai	
Year:	2008	■ Debtor 2 only		Current value of the	Current value of the
	te mileage: 150,000	Debtor 1 and Debtor 2 only		entire property?	portion you own?
Other infor	mation:	☐ At least one of the debtors	and another		
		☐ Check if this is communit	y property	\$1,300.00	\$1,300.00
		(see instructions)			
-					
	ircraft, motor homes, ATVs an				
<i>Examples:</i> Boa	ats, trailers, motors, personal wa	tercraft, fishing vessels, snow	mobiles, motorcycle ac	cessories	
■ No					
☐ Yes					

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Debtor 1 Debtor 2	Eric Joseph Molitor Chelsee Renae Molitor	Ca	ase number (if known)	
		or all of your entries from Part 2, including ar		\$2,700.00
Part 3: D	escribe Your Personal and Household Items	S		
Do you o	own or have any legal or equitable intere	est in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Examp □ No	hold goods and furnishings bles: Major appliances, furniture, linens, ch bles: Describe	nina, kitchenware		·
	Household goods	& furnishings (incl electronics)		\$3,790.00
■ No		stereo, and digital equipment; computers, printe ia players, games	ers, scanners; music collec	tions; electronic devices
Examp ■ No	tibles of value bles: Antiques and figurines; paintings, prir other collections, memorabilia, collections, Describe	nts, or other artwork; books, pictures, or other artitibles	t objects; stamp, coin, or b	aseball card collections;
Equipn Examp	ment for sports and hobbies	other hobby equipment; bicycles, pool tables, gol	lf clubs, skis; canoes and k	kayaks; carpentry tools;
0. Firear <i>Exam</i> □ No		n, and related equipment		
				\$550.0
		5 hand gun- \$450.00 ns Elite hand gun- \$200.00		\$650.00
□ No	es nples: Everyday clothes, furs, leather coats Describe	s, designer wear, shoes, accessories		
	wardrobe			\$200.00
	wardrobe			\$200.00

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Filed 10/14/19 Case 19-02411-als7 Doc 1 Entered 10/14/19 17:58:17 Page 12 of 58 Document Debtor 1 **Eric Joseph Molitor Chelsee Renae Molitor** Debtor 2 Case number (if known) Yes. Describe..... \$500.00 wedding ring wedding ring \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... 5 dogs \$0.00 2 cats 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5,990.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Iowa State Savings Bank** \$188.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ☐ No Institution or issuer name: Yes..... 2 shares of 3M stock \$173.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Name of entity:

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

Schedule A/B: Property

Official Form 106A/B

Case 19-02411-als7 Doc 1 Filed 10/14/19 Entered 10/14/19 17:58:17 Desc Main Page 13 of 58 Document Debtor 1 **Eric Joseph Molitor** Debtor 2 **Chelsee Renae Molitor** Case number (if known) ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **3M** \$1,444,00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☐ No

Yes. Give specific information..

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	Case number (if known)	
accrued wages & disposab	le earnings	Unknown
accrued wages & disposab	le earnings	Unknown
garnished wages		\$834.00
rance; health savings account (H	SA); credit, homeowner's, or renter's insura	ince
	Beneficiary:	Surrender or refund value:
		ceive property because
aims of every nature, including	counterclaims of the debtor and rights t	o set off claims
dy list		
		\$2,639.00
erty You Own or Have an Interest In	. List any real estate in Part 1.	
interest in any business-related pro	perty?	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
you already earned		
	oiers, fax machines, rugs, telephones, desks	s, chairs, electronic devices
	garnished wages rance; health savings account (Heach policy and list its value. name: ou from someone who has died to expect proceeds from a life institutes, insurance claims, or rights to the expect proceeds from a life institutes, insurance claims, or rights to expect proceeds from a life institutes, insurance claims, or rights to expect proceeds from Part 4, including any entry You Own or Have an Interest In interest in any business-related process in any business-related process.	accrued wages & disposable earnings garnished wages garnished wages rance; health savings account (HSA); credit, homeowner's, or renter's insurate each policy and list its value. Beneficiary: But from someone who has died It, expect proceeds from a life insurance policy, or are currently entitled to recommend to the commendation or not you have filed a lawsuit or made a demand for payment utes, insurance claims, or rights to sue aims of every nature, including counterclaims of the debtor and rights the lattices from Part 4, including any entries for pages you have attached early You Own or Have an Interest In. List any real estate in Part 1. Interest in any business-related property?

	Case 19-024			Filed 10/1 Document		Entered 10 Je 15 of 58		7:58:17	Desc Main
Debtor 1 Debtor 2	Eric Joseph M Chelsee Rena						Case number	(if known)	
□ No	nery, fixtures, equ	ipment, supp	olies you u	se in business,	and tools	of your trade			
		Husqvarna 8 x 12 Dutc 170pc Cres Stihl H556C 2.5 gal gas 24ft extens Graco Nova Appliance o Wet/dry vac	YTH24V4 h Barn sh cent tool 5 24" hedo can- \$10.0 on ladden a 390 pain dolly- \$50. c- \$20.00 5 x 12 trai	r- \$100.00 ht sprayer- \$40 .00 iler- \$800.00	50.00	00			\$4,740.00
11. Invent o ■ No □ Yes.	ory Describe								
■ No	sts in partnerships Give specific infor		them				% of owners	hip:	
■ No.	mer lists, mailing l		-		11 U.S.C. §	101(41A))?			
	■ No □ Yes. Describe								
■ No	usiness-related pro		id not alrea	ady list					
	the dollar value of art 5. Write that nu							iched	\$4,740.00
	escribe Any Farm- an you own or have an int				Own or H	ave an Interest In			
■ No.	u own or have any Go to Part 7. s. Go to line 47.	legal or equ	itable inter	est in any farm-	or comm	ercial fishing-r	elated proper	ty?	

53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

Describe All Property You Own or Have an Interest in That You Did Not List Above

■ No

Part 7:

 $\hfill \square$ Yes. Give specific information.......

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Debtor 1 **Eric Joseph Molitor Chelsee Renae Molitor** Case number (if known) Debtor 2 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$2,700.00 Part 3: Total personal and household items, line 15 57. \$5,990.00 Part 4: Total financial assets, line 36 58. \$2,639.00 59. Part 5: Total business-related property, line 45 \$4,740.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$16,069.00 Copy personal property total \$16,069.00 62. 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$16,069.00

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Fill in this information to identify your case:								
Debtor 1	Eric Joseph Molit	or						
	First Name	Middle Name	Last Name					
Debtor 2	Chelsee Renae Molitor							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bank	cruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA					
Case number					☐ Check if this is an amended filing			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.							
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption				

Copy the value from Schedule A/B \$1,400.00	Che	eck only one box for each exemption.	
\$1,400.00	_		
		\$1,400.00	lowa Code § 627.6(9)
		100% of fair market value, up to any applicable statutory limit	
\$1,300.00		\$1,300.00	Iowa Code § 627.6(9)
		100% of fair market value, up to any applicable statutory limit	
\$3,790.00		\$3,790.00	Iowa Code § 627.6(5)
		100% of fair market value, up to any applicable statutory limit	
\$550.00		\$550.00	Iowa Code § 627.6(2)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	lowa Code § 627.6(5)
		100% of fair market value, up to	
	\$1,300.00 \$3,790.00	\$1,300.00	\$1,300.00 \$1,300.00 \$1,300.00 \$1,00% of fair market value, up to any applicable statutory limit \$3,790.00 \$3,790.00 \$3,790.00 \$100% of fair market value, up to any applicable statutory limit \$550.00 \$550.00 \$100% of fair market value, up to any applicable statutory limit \$550.00 \$200.00 \$200.00

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or 2 Chelsee Renae Molitor			Case number (if known)	
rief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
vardrobe	\$200.00		\$200.00	lowa Code § 627.6(5)
ine from Schedule A/B: 11.2			100% of fair market value, up to any applicable statutory limit	
vedding ring ine from Schedule A/B: 12.1	\$500.00		\$500.00	lowa Code § 627.6(1)(a)
			100% of fair market value, up to any applicable statutory limit	
vedding ring ine from Schedule A/B: 12.2	\$100.00		\$100.00	lowa Code § 627.6(1)(a)
			100% of fair market value, up to any applicable statutory limit	
Checking: Iowa State Savings Bank in inches in	\$188.00		75%	lowa Code §§ 642.21, 537.5105
			100% of fair market value, up to any applicable statutory limit	
01(k): 3M	\$1,444.00		\$1,444.00	lowa Code § 627.6(8)(e) & (f
ine from <i>Schedule A/B</i> : 21.1			100% of fair market value, up to any applicable statutory limit	
accrued wages & disposable	Unknown		75%	lowa Code §§ 642.21, 537.5105
ine from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	
accrued wages & disposable earnings	Unknown		75%	lowa Code §§ 642.21, 537.5105
ine from Schedule A/B: 30.2			100% of fair market value, up to any applicable statutory limit	
garnished wages ine from Schedule A/B: 30.3	\$834.00		\$834.00	lowa Code § 627.6(10)
and north correction ().			100% of fair market value, up to any applicable statutory limit	
Stihl MS 251 chainsaw- \$200.00 Husqvarna YTH24V48 riding mower-	\$4,740.00		\$4,740.00	lowa Code § 627.6(11)
8800.00 3 x 12 Dutch Barn shed- \$2000.00 70pc Crescent tool set- \$40.00 Stihl H556C 24" hedge trimmer- 6250.00 2.5 gal gas can- \$10.00 24ft extension ladder- \$100.00 Graco Nova 390 pai ine from Schedule A/B: 40.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Debtor 1 Eric Joseph Molitor

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Debtor 1
Debtor 2
Debtor 2
Debtor 2
Debtor 2
Debtor 3
Debtor 4
Debtor 4
Debtor 5
Debtor 5
Debtor 6
Debtor 6
Debtor 6
Debtor 7
Debtor 7
Debtor 7
Debtor 8
Debtor 9
Deb

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Fill in this infor	mation to identify your	case:		
Debtor 1	Eric Joseph Moli	tor		
	First Name	Middle Name	Last Name	
Debtor 2	Chelsee Renae M	olitor		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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				ocument	Page 21 of 58		
Fill in t	his inform	ation to identify your	case:				
Debtor	1	Eria Jasanh Malit					
Deptoi	'	Eric Joseph Molit	Middle Na	me	Last Name		
Debtor	2	Chelsee Renae M	olitor				
(Spouse i	f, filing)	First Name	Middle Na	me	Last Name		
United	States Ban	kruptcy Court for the:	SOUTHERN	DISTRICT OF I	OWA		
Case n	umher						
(if known)				-		ПС	heck if this is an
							mended filing
		106E/F F: Creditors W	ho Have	Unsecure	d Claims		12/15
					ITY claims and Part 2 for credit		
Schedul Schedul left. Atta	e G: Execute e D: Credito ch the Cont d case num	ory Contracts and Unexp rs Who Have Claims Sec	ired Leases (Off ured by Propert e. If you have n	icial Form 106G). y. If more space i o information to r	o list executory contracts on Sc. Do not include any creditors was needed, copy the Part you never in a Part, do not file that I	rith partially secured claims ed, fill it out, number the en	that are listed in tries in the boxes on the
1. Do	any creditor	s have priority unsecure	d claims agains	t you?			
	No. Go to Pa	ırt 2.					
	Yes.						
	165.						
Part 2:	List All	of Your NONPRIORIT	Y Unsecured	Claims			
3. Do	anv creditor	s have nonpriority unsec	ured claims aga	ainst vou?			
_	•		_	•	th vour other cohodules		
		e nothing to report in this p	art. Submit this it	orm to the court wi	in your other schedules.		
	Yes.						
uns	ecured claim n one credito	, list the creditor separately	for each claim.	For each claim list	the creditor who holds each cla ed, identify what type of claim it is u have more than three nonpriority	. Do not list claims already inc	luded in Part 1. If more
							Total claim
4.1	Brightw	ater Capital		Last 4 digits of a	count number		\$554.00
		Creditor's Name		Luot 4 digito of di			Ψ334.00
	850 Con	course Pkwy S Ste	120	When was the de	bt incurred?		_
		, FL 32751					
		reet City State Zip Code		As of the date yo	u file, the claim is: Check all that	apply	
		red the debt? Check one.					
	Debtor	•		☐ Contingent			
	Debtor 2	2 only		☐ Unliquidated			
	Debtor '	1 and Debtor 2 only		☐ Disputed			
	☐ At least	one of the debtors and and	other	Type of NONPRIC	ORITY unsecured claim:		
	☐ Check i	f this claim is for a comr	nunity	☐ Student loans			
	debt		-		sing out of a separation agreemer	nt or divorce that you did not	
		n subject to offset?		report as priority c			
	No			•	on or profit-sharing plans, and oth	er similar debts	
	☐ Yes			Other. Specify	TBOM/Helzberg's acct		
				. ,	-		•

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	2 Chelsee Renae Molitor	Case number (if known)	
4.2	City of Des Moines	Last 4 digits of account number	\$583.00
	Nonpriority Creditor's Name PO Box 511 Des Moines, IA 50302	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify ambulance	
4.3	Community First Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00
	PO Box 737 Ottumwa, IA 52501	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify overdrawn acct	
4.4	Des Moines River Physicians Nonpriority Creditor's Name	Last 4 digits of account number	\$294.00
	Attn #21197Y PO Box 14000	When was the debt incurred?	
	Belfast, ME 04915	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only		
		Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical services	
		Gpss.,	

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Debtor	Chelsee Renae Molitor	Case number (if known)	
4.5	Dish Network	Last 4 digits of account number	\$435.00
	Nonpriority Creditor's Name PO Box 94063	When was the debt incurred?	
	Palatine, IL 60094 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify satellite dish	
1.6	First National Bank of Omaha Nonpriority Creditor's Name	Last 4 digits of account number	\$2,646.00
	PO Box 2557 Omaha, NE 68103	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
.7	GM Financial Nonpriority Creditor's Name	Last 4 digits of account number	\$11,757.00
	PO Box 183834 Arlington, TX 76096	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Ioan	

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Debtor 1 Debtor 2	Eric Joseph Molitor Chelsee Renae Molitor	Case number (if known)	
	Knoxville Fire Dept Nonpriority Creditor's Name	Last 4 digits of account number	\$2,965.00
I	PO Box 747 Wheeling, IL 60090	When was the debt incurred?	
1	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
ļ	☐ Debtor 1 only	☐ Contingent	
l	Debtor 2 only	☐ Unliquidated	
I	Debtor 1 and Debtor 2 only	☐ Disputed	
I	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
ı	s the claim subject to offset?	report as priority claims	
I	No	\square Debts to pension or profit-sharing plans, and other similar debts	
i	□Yes	Other. Specify ambulance	
	Kohls	Last 4 digits of account number	\$998.00
I	Nonpriority Creditor's Name PO Box 2983 Milwaukee, WI 53201	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
'	Who incurred the debt? Check one.		
ļ	Debtor 1 only	☐ Contingent	
I	Debtor 2 only	☐ Unliquidated	
I	Debtor 1 and Debtor 2 only	☐ Disputed	
ı	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
_	□ Yes	■ Other. Specify Credit card purchases	
4.1	IMAIN From dies o		\$4.500.00
_	LVNV Funding Nonpriority Creditor's Name	Last 4 digits of account number	\$1,588.00
I	PO Box 10497 Greenville, SC 29603	When was the debt incurred?	
1	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
ı	Debtor 1 only	☐ Contingent	
1	Debtor 2 only	☐ Unliquidated	
ļ	Debtor 1 and Debtor 2 only	☐ Disputed	
ı	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
ļ	☐ Check if this claim is for a community	☐ Student loans	
	debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
I	No	\square Debts to pension or profit-sharing plans, and other similar debts	
I	□ Yes	Capital One acct Marion County judgment; Case No. SC 031318	

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Mediacom	Last 4 digits of account number	\$538.
Nonpriority Creditor's Name 3306 E. Main St Knoxville, IA 50138	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	■ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify cable	
Mercy Medical Center	Last 4 digits of account number	\$540
Nonpriority Creditor's Name 1111 6th Ave Des Moines, IA 50314	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify medical services	
Midland Funding	Last 4 digits of account number	\$759
Nonpriority Creditor's Name		• • • •
PO Box 301030	When was the debt incurred?	
Los Angeles, CA 90030 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ NO	Synchrony Bank/Walmart acct Marion County judgment; Case No. SC	

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Midland Funding	Last 4 digits of account number 9550	\$543.0
Nonpriority Creditor's Name PO Box 301030 Los Angeles, CA 90030	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Comenity Bank/The Buckle acct	
Midland Funding	Last 4 digits of account number	\$2,719.
Nonpriority Creditor's Name PO Box 301030	When was the debt incurred?	
Los Angeles, CA 90030 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	ne or and take you me, and claim to or contain and apprix	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Capital One acct	
Midland Funding	Last 4 digits of account number	\$923.
Nonpriority Creditor's Name		,
PO Box 301030 Los Angeles, CA 90030	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Synchrony Bank/Walmart acct	

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Debtor 1 Eric Joseph Molitor Debtor 2 Chelsee Renae Molitor	Case number (if known)	
4.1 Nebraska Furniture Mart	Last 4 digits of account number	\$3,280.00
Nonpriority Creditor's Name PO Box 2335 Omaha, NE 68103	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Pella Regional Health Care Nonpriority Creditor's Name	Last 4 digits of account number	\$3,975.00
404 Jefferson St Pella, IA 50219	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify medical services	
4.1 Pella Regional Health Clinics	Last 4 digits of account number	\$730.00
Nonpriority Creditor's Name 405 Monroe St	When was the debt incurred?	
Pella, IA 50219 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify medical services	

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	Case number (if known)	
Portfolio Recovery Associates	Last 4 digits of account number	\$996.00
Nonpriority Creditor's Name PO Box 12914	When was the debt incurred?	
Norfolk, VA 23541 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Capital One acct	
Portfolio Recovery Associates	Last 4 digits of account number	\$1,867.00
Nonpriority Creditor's Name PO Box 12914 Norfolk, VA 23541	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Comenity Bank/The Buckle Acct	
Portfolio Recovery Associates Nonpriority Creditor's Name	Last 4 digits of account number	\$2,117.00
PO Box 12914 Norfolk, VA 23541	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

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Chelsee Renae Molitor	Case number (if known)	
Portfolio Recovery Associates	Last 4 digits of account number	\$2,540.0
Nonpriority Creditor's Name PO Box 12914	When was the debt incurred?	
Norfolk, VA 23541 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Comenity Bank	
St Anthony Regional Hospital	Last 4 digits of account number	\$5,526.0
Nonpriority Creditor's Name 10604 Justin Dr Urbandale, IA 50322	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical services	
Target Card Services	Last 4 digits of account number	\$547.0
Nonpriority Creditor's Name PO Box 660170 Dallas, TX 75266	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit card purchases	

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	2 Chelsee Renae Molitor	Case number (if known)	
4.2	The Bank of Missouri		\$554.00
6	Nonpriority Creditor's Name PO Box 4499	Last 4 digits of account number When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.2	University of Iowa Hospitals &		
7	Clinics	Last 4 digits of account number	\$9,813.00
	Nonpriority Creditor's Name 2100 University Capitol Centre lowa City, IA 52242	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical services	
4.2	Windstream	Look A divite of cooperat number	\$98.00
8	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ00.00
	Attn Support Serv 1720 Galeria	When was the debt incurred?	
	Charlotte, NC 28270		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Поли	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify cable	
		· · ·	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Eric Joseph Molitor Debtor 2 Chelsee Renae Molitor		Case number (if known)
have more than one creditor for any of the debts notified for any debts in Parts 1 or 2, do not fill or		additional creditors here. If you do not have additional persons to be
Name and Address AAA Collections PO Box 881 Sioux Falls, SD 57101	On which entry in Part 1 or Part 2 di Line 4.2 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Abbott, Osborn & Van Vliet PLC 974 73rd St, Suite 20 Des Moines, IA 50324	On which entry in Part 1 or Part 2 di Line 4.13 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address AFNI PO Box 3097 Bloomington, IL 61702	On which entry in Part 1 or Part 2 di Line 4.5 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Credit Protection Association PO Box 802068 Dallas, TX 75380	On which entry in Part 1 or Part 2 di Line 4.11 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address H & R Accounts PO Box 672 Moline, IL 61266	On which entry in Part 1 or Part 2 di Line 4.18 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address H & R Accounts PO Box 672 Moline, IL 61266	On which entry in Part 1 or Part 2 di Line 4.19 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address I.C. Systems Inc PO Box 64378 Saint Paul, MN 55164	On which entry in Part 1 or Part 2 di Line 4.4 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Link Revenue Resources LLC 4891 Ronson Ct San Diego, CA 92111	On which entry in Part 1 or Part 2 di Line 4.12 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Messerli & Kramer PA 3033 Campus Dr, Suite 250 Plymouth, MN 55441	On which entry in Part 1 or Part 2 di Line 4.10 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Professional Service Bureau PO Box 548 Anoka, MN 55303	On which entry in Part 1 or Part 2 di Line 4.12 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Radius Global Solutions PO Box 390846 Minneapolis, MN 55439	On which entry in Part 1 or Part 2 di Line 4.7 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?

Official Form 106 E/F

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Debtor 1 Eric Joseph Molitor Chelsee Renae Molitor		Case number (if known)
Receivables Performance	Line 4.28 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
Management LLC PO Box 1548 Lynnwood, WA 98046		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	60,385.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	60,385.00

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Fill in this infor	mation to identify your	case:	Ü	
Debtor 1	Eric Joseph Moli	tor		
	First Name	Middle Name	Last Name	
Debtor 2	Chelsee Renae M	lolitor		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA	
Case number				
(if known)				☐ Check if this is ar
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

I	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4	-				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	mi Page 34 0	1 58
Fill in this	information to identify your	case:		
Debtor 1	Evia Jasanh Malif			
Debioi i	Eric Joseph Molit	Middle Name	Last Name	
Debtor 2	Chelsee Renae M			
(Spouse if, filin		Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA	
Case numb	oer			☐ Check if this is an
(ii idiowii)				amended filing
	Form 106H	ehtors		40/45
Scried	ule H. Toul Cou	EDIOI 2		12/15
■ No □ Yes 2. With		lived in a community p	roperty state or territor	y? (Community property states and territories include
☐ Yes. 3. In Coluin line Form 1	. Did your spouse, former spou umn 1, list all of your codebt 2 again as a codebtor only i	ors. Do not include your f that person is a guarar	spouse as a codebtor	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 6G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
				Sept.
3.1				Schedule D, line
ľ	Name			Schedule E/F, line
				☐ Schedule G, line
1	Number Street			_
(City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			Schedule E/F, line
				☐ Schedule E/F, line
	Number Street	01-1-	710.0	
(City	State	ZIP Code	

Fill in this informat	tion to identify your case:	
Debtor 1	Eric Joseph Molitor	
Debtor 2 (Spouse, if filing)	Chelsee Renae Molitor	
United States Ban	nkruptcy Court for the: SOUTHERN DISTRICT OF IOWA	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo		13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Arborist Slitter Operator** Include part-time, seasonal, or **Employer's name Binn & Sons** 3M self-employed work. **Employer's address** Occupation may include student 1711 Prospect St 3406 E. Pleasant St or homemaker, if it applies. Knoxville, IA 50138 Knoxville, IA 50138 How long employed there? September 16, 2019-April 22, 2019- present present

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Dobtor 1

For Dobton 2 or

				For Deptor 1		filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	2,275.00	\$	3,544.00
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$_	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	2,275.00	\$_	3,544.00

Official Form 106I Schedule I: Your Income page 1

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Debtor 1 Debtor 2	Eric Joseph Molitor Chelsee Renae Molitor	_	Case ı	number (<i>if known</i>)			
			For	Debtor 1		Debtor 2 or Filing spouse	
Co	ppy line 4 here	4.	\$	2,275.00	\$	3,544.00	-
5. Li	st all payroll deductions:						
5a	Tax, Medicare, and Social Security deductions	5a.	\$	455.00	\$	622.00	
5b	•	5b.	\$	0.00	\$	0.00	-
50	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	248.00	_
50	. Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	-
5e	. Insurance	5e.	\$	0.00	\$	321.00	_
5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	_
50	. Union dues	5g.	\$	0.00	\$	0.00	-
5h	Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00	_
6. A 0	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	455.00	\$	1,191.00	_
7. C a	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,820.00	\$	2,353.00	_
8. Li 8a	st all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
8b	•	8b.	\$	0.00	\$	0.00	_
80			\$	0.00	\$	0.00	-
80		8d.	\$	0.00	\$	0.00	_
8e		8e.	\$	0.00	\$	0.00	_
8f.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	-
8g 8h		8g. 8h.+	\$ 	0.00	- \$—	0.00	_
OI	Other monthly income. Specify: Atlantic & Pacific Pub part time	_ 011.7	Ψ_	0.00	- - -	280.00	- ¬
9. A o	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	280.00	0
10 C :	alculate monthly income. Add line 7 + line 9.	10. \$		1,820.00 + \$	2.63	33.00 = \$	4 452 00
	Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. Ψ -		1,820.00 + Φ_	2,03	53.00	4,453.00
Ind otl Do	ate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your her friends or relatives. on the include any amounts already included in lines 2-10 or amounts that are not specify:	depend				chedule J. 11. +\$	0.00
W	Id the amount in the last column of line 10 to the amount in line 11. The restrict that amount on the Summary of Schedules and Statistical Summary of Certaplies					12. \$	4,453.00
						Combine month!	ned y income
13. D o ■	o you expect an increase or decrease within the year after you file this form No. Yes. Explain:	1?					

Fill in	this informa	ation to identify yo	our case:					
Debto	or 1	Eric Joseph	Molitor			Che	ck if this is:	
							An amended filing	
Debto		Chelsee Rer	nae Molite	or				ving postpetition chapter
(Spot	use, if filing)						13 expenses as of	the following date:
Unite	d States Bank	ruptcy Court for the	: SOUTH	IERN DISTRICT OF IOWA	<u> </u>		MM / DD / YYYY	
Case (If kno	number							
Off	ficial Fo	orm 106J						
			Evnor	1000				40/45
		J: Your			o filing together be	4h ava anu	ally reen en eible fe	12/15
infor	mation. If n		eded, atta	. If two married people and the control of the cont				
Part		ribe Your House	∍hold					
	Is this a joi							
	□ No. Go to		_					
	■ Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate Housel	hold of Deb	otor 2.	
2.	Do vou hav	e dependents?	□ No					
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	5							□ No
	Do not state dependents				daughter		2	■ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
	expenses c	penses include of people other t d your depende	:han 👝	No Yes				
Part		nate Your Ongoi						
expe		a date after the		uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	cial Form 1		u nave me	nada it on <i>concaale it i</i>	iodi inoome		Your exp	enses
		or home owners		ses for your residence. I	nclude first mortgage	4. \$	\$	600.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. S	\$	0.00
	4b. Prope	erty, homeowner's	s, or renter	's insurance		4b. S	\$	0.00
				upkeep expenses		4c. \$	\$	0.00
		eowner's associa				4d. \$	\$	0.00
5	Additional	mortgage paym	ents for vo	our residence, such as ho	me equity loans	5 9	\$	0.00

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	oseph Molitor se Renae Molitor	Case num	nber (if known)	
<u> </u>	- Total Market	,		
. Utilities:	the book potential man	0-	œ.	222.22
	ity, heat, natural gas	6a.	·	200.00
	sewer, garbage collection	6b.	· :	82.00
•	one, cell phone, Internet, satellite, and cable services	6c. 6d.	·	368.00
	usekeeping supplies	6u. 7.		0.00
	d children's education costs	7. 8.	\$ \$	600.00 325.00
	ndry, and dry cleaning	9.		150.00
	e products and services	10.	·	0.00
	dental expenses	11.	· :	150.00
	on. Include gas, maintenance, bus or train fare.		Ψ	130.00
	e car payments.	12.	\$	275.00
	t, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	ntributions and religious donations	14.	\$	0.00
Insurance.	•			
	e insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insi	urance	15a.	·	0.00
15b. Health i	· · · · · · · · · · · · · · · · · · ·	15b.	*	0.00
15c. Vehicle	insurance	15c.	\$	27.00
15d. Other in	surance. Specify:	15d.	\$	0.00
	t include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
	r lease payments:	170	¢	0.00
	ments for Vehicle 1	17a.	·	0.00
	rments for Vehicle 2	17b.		0.00
17c. Other. S		17c.	*	0.00
17d. Other. S	specily. Its of alimony, maintenance, and support that you did not report as	17d.	\$	0.00
	m your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
	nts you make to support others who do not live with you.		\$	0.00
Specify:	, , , , , , , , , , , , , , , , , , , ,	19.	·	
. Other real pro	operty expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
20a. Mortgag	ges on other property	20a.	\$	0.00
20b. Real es	tate taxes	20b.	\$	0.00
20c. Propert	y, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Mainter	nance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeo	wner's association or condominium dues	20e.	\$	0.00
. Other: Specif	y: pet care	21.	+\$	100.00
haircuts	·		+\$	25.00
Calaulata				
-	ur monthly expenses		•	2 052 00
	4 through 21.		\$	3,052.00
	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2			
22c. Add line	22a and 22b. The result is your monthly expenses.		\$	3,052.00
Calculate voi	ır monthly net income.			
•	ne 12 (your combined monthly income) from Schedule I.	23a.	\$	4,453.00
	our monthly expenses from line 22c above.	23b.		3,052.00
.,,				
	t your monthly expenses from your monthly income.	_	<u></u>	4 404 00
The res	ult is your monthly net income.	23c.	\$	1,401.00
	d and the control of	(!!! :		
	ct an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect your			or decrease because of a
	ryou expect to finish paying for your car loan within the year of do you expect your he terms of your mortgage?	morigage	payment to increase	on uculcase necause of a
■ No.	, ,			
☐ Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Eric Joseph Molit				
202101 1	First Name	Middle Name	Last Name		
Debtor 2	Chelsee Renae M	olitor			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT OF IOV	/A		
Case number					
(if known)					☐ Check if this is an amended filing
You must file thi obtaining money years, or both. 1	is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1		nded sc	hedules. Making a false sta	tement, concealing property, or 00, or imprisonment for up to 20
Sigi	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorney to h	ielp you	fill out bankruptcy forms?	
■ No					
☐ Yes. N	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the summary ar	ıd sched	ules filed with this declarat	ion and
X /s/ Erio	Joseph Molitor		X /s/ (Chelsee Renae Molitor	
Eric Jo	seph Molitor			elsee Renae Molitor	
Signatu	re of Debtor 1		Sign	ature of Debtor 2	
Date (October 14, 2019		Date	October 14, 2019	

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Fill	in this inform	ation to identify your	case:			
Deb	otor 1	Eric Joseph Moli	tor			
		First Name	Middle Name	Last Name		
	otor 2	Chelsee Renae M		Loot Name		
(Spoi	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	kruptcy Court for the:	SOUTHERN DISTRICT (OF IOWA		
Cas (if kn	e number					Check if this is an mended filing
Sta		of Financial <i>i</i>		duals Filing for B		4/19
infor	mation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Par	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	■ Married □ Not mar	ried				
2.	During the la	st 3 years have you	lived anywhere other than	where you live now?		
-	During the le	ist o years, nave you	ived anywhere office than	where you live how.		
	■ No □ Yes. List	all of the places you li	ved in the last 3 years. Do no	ot include where you live nov	v.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
					nity property state or territory ico, Texas, Washington and W	
	■ No					
	_	ke sure you fill out Sch	edule H: Your Codebtors (O	fficial Form 106H).		
			_			
Par	Explain	n the Sources of You	Income			
	Fill in the tota	l amount of income you	received from all jobs and a	ng a business during this y all businesses, including part e together, list it only once u		ndar years?
	□ No					
	_	in the details.				
			Dahtan 4		Dahtan 2	
			Debtor 1 Sources of income	Gross income	Debtor 2	Gross income
			Check all that apply.	(before deductions and exclusions)	Sources of income Check all that apply.	(before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,845.00	■ Wages, commissions, bonuses, tips	\$23,858.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	☐ Wages, commissions, bonuses, tips	\$4,160.00	☐ Wages, commissions, bonuses, tips	\$0.00
	Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 20	Wages, commissions, bonuses, tips	\$23,792.00	■ Wages, commissions, bonuses, tips	\$20,830.00
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$2,406.00	☐ Wages, commissions, bonuses, tips	\$0.00
	Operating a business		☐ Operating a business	
For the calendar year before t (January 1 to December 31, 20		exclusions) and exclusions and exclusions and exclusions and exclusions and exclusions and exclusions \$0.00		
	☐ Operating a business		☐ Operating a business	
		40.00		\$0.00
	☐ Wages, commissions, bonuses, tips	\$0.00		φυ.υυ
	bonuses, tips Operating a business income during this year or the two	o previous calendar years?	bonuses, tips ☐ Operating a business	
Include income regardless of and other public benefit pay winnings. If you are filing a	operating a business Operating a business income during this year or the two of whether that income is taxable. Ex- yments; pensions; rental income; inte- joint case and you have income that	o previous calendar years? amples of other income are a rest; dividends; money collec you received together, list it c	bonuses, tips Operating a business Ilimony; child support; Social Seted from lawsuits; royalties; aronly once under Debtor 1.	Security, unemployment
Include income regardless of and other public benefit pay winnings. If you are filing a judicial List each source and the group No	bonuses, tips Operating a business income during this year or the two of whether that income is taxable. Ex- rments; pensions; rental income; inte joint case and you have income that oss income from each source separa	o previous calendar years? amples of other income are a rest; dividends; money collec you received together, list it c	bonuses, tips Operating a business Illimony; child support; Social Seted from lawsuits; royalties; aronly once under Debtor 1. That you listed in line 4.	Security, unemployment
Include income regardless of and other public benefit pay winnings. If you are filing a judicial List each source and the grand No	operating a business Operating a business income during this year or the two of whether that income is taxable. Ex- yments; pensions; rental income; inte- joint case and you have income that	o previous calendar years? amples of other income are a rest; dividends; money collec you received together, list it o ately. Do not include income t Gross income from each source (before deductions and	bonuses, tips Operating a business Illimony; child support; Social Seted from lawsuits; royalties; aronly once under Debtor 1. hat you listed in line 4. Debtor 2 Sources of income	Security, unemployment and gambling and lottery Gross income (before deductions

Debtor 1 Eric Joseph Molitor

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	Eric Joseph I Chelsee Rena			Cas	se number (if known)	
■ Ye			ve primarily consumer de d for bankruptcy, did you pa		al of \$600 or more?	,
	■ No.	Go to line 7.				
	□ _{Yes}	List below each credit	domestic support obligation			you paid that creditor. Do not Also, do not include payments to an
Credit	tor's Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Insiders of which a busin alimony	rs include your re th you are an off ness you operate y.	elatives; any general pa icer, director, person ir	control, or owner of 20% c	neral partners; partne or more of their voting	erships of which yo g securities; and ar	was an insider? u are a general partner; corporations ny managing agent, including one for s, such as child support and
	er's Name and A		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
■ No	0	ebts guaranteed or cos	signed by an insider.			
Inside	er's Name and A	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Part 4:	dentify Legal A	ctions, Repossessio	ns, and Foreclosures			
List all smodific	such matters, in cations, and conf	cluding personal injury tract disputes.	ccy, were you a party in ar cases, small claims action			
Case i	title number		Nature of the case	Court or agency		Status of the case
vs Chels	and Funding see Molitor 31165		Civil	Marion County Court Knoxville, IA	District	□ Pending□ On appeal■ Concluded
						judgment
LVNV	/ Funding		Civil	Marion County	District	☐ Pending
vs	_			Court		☐ On appeal
	see Molitor 31318			Knoxville, IA		Concluded
						Judgment

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	btor 1 Eric Joseph Molitor Chelsee Renae Molitor		Case	number (i	if known)	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo	tcy, w	as any of your property repossessed, for	eclosed,	garnished, attached	d, seized, or levied?
	□ No. Go to line 11.					
	Yes. Fill in the information below.					
	Creditor Name and Address	De	scribe the Property		Date	Value of the
		Ex	plain what happened			property
	LVNV Funding		iges		September 6,	\$834.00
	PO Box 10497				2019- present	• • • • • • • • • • • • • • • • • • • •
	Greenville, SC 29603		Property was repossessed.			
			Property was foreclosed. Property was garnished.			
		_				
			Property was attached, seized or levied.			
	GM Financial PO Box 183834	20	15 Dodge Ram		March 2019	Unknown
	Arlington, TX 76096		Property was repossessed.			
			Property was foreclosed.			
			Property was garnished.			
			Property was attached, seized or levied.			
	■ No □ Yes. Fill in the details.					
	Creditor Name and Address	De	scribe the action the creditor took		Date action was taken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a			n of an a	ssignee for the bend	efit of creditors, a
	■ No					
	☐ Yes					
Par	tt 5: List Certain Gifts and Contributions	i				
13.	Within 2 years before you filed for bankru ■ No	ptcy, (did you give any gifts with a total value of	more th	an \$600 per person	?
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person		Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankru ■ No	ptcy,	did you give any gifts or contributions wit	th a total	value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co	ntribut	ion.			
	Gifts or contributions to charities that to more than \$600 Charity's Name	tal	Describe what you contributed		Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Code)					

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	otor 1 otor 2	Eric Joseph Molitor Chelsee Renae Molitor			Case number	(if known)	
Pai	rt 6:	List Certain Losses					
15.	Withi		uptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of the	ft, fire, other disaster,
	_	No Yes. Fill in the details.					
		cribe the property you lost and the loss occurred	Include	ibe any insurance coverage for the loe the amount that insurance has paid. Loe claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Pai	rt 7:	List Certain Payments or Transfe	rs				
16.	cons Includ	ulted about seeking bankruptcy or de any attorneys, bankruptcy petition No	prepari	id you or anyone else acting on your ng a bankruptcy petition? rs, or credit counseling agencies for ser			rty to anyone you
	Pers Add Ema	Yes. Fill in the details. son Who Was Paid ress iil or website address son Who Made the Payment, if Not	You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Jan 700 Des	kins Law Firm 2nd Ave. Suite 103 Moines, IA 50309 ej572@hotmail.com		Attorney Fees		October 4, 2019	\$1,000.00
17.	prom		editors o	id you or anyone else acting on your or to make payments to your creditors ted on line 16.		r transfer any prope	rty to anyone who
	_	No Yes. Fill in the details.					
		son Who Was Paid ress		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	Includinclud	ferred in the ordinary course of yo	ur busir rs made	as security (such as the granting of a se			
	Add	son Who Received Transfer ress son's relationship to you		Description and value of property transferred		any property or received or debts change	Date transfer was made
19.	Withi bene	. ,		, did you transfer any property to a so tion devices.)	elf-settled tru	ıst or similar device	of which you are a
	Nam	ne of trust		Description and value of the prope	erty transferr	ed	Date Transfer was made

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Debtor 1 Eric Joseph Molitor
Debtor 2 Chelsee Renae Molitor

Case number (if known)

Pai	t 8:	List of Certain Financial Accounts, In	strur	nents, Safe Depos	it Boxes, and St	orag	e Unit	S		
20.	sol	hin 1 year before you filed for bankruptod, moved, or transferred? lude checking, savings, money market,	•	•				•	•	,
		uses, pension funds, cooperatives, asso No			•		СРОЗП	i, shares in banks, ere	uit ui	mons, brokerage
		Yes. Fill in the details.								
		ume of Financial Institution and Idress (Number, Street, City, State and ZIP de)		st 4 digits of count number	Type of account instrument	unt o	or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.		Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
		No								
		Yes. Fill in the details.								
		me of Financial Institution Idress (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Des	scribe	the contents		Do you still have it?
22.	Hav	ve you stored property in a storage unit	or pl	ace other than you	ır home within 1	year	r befor	e you filed for bankrup	otcy?	•
		■ No								
		_ `								
	— Na	me of Storage Facility		Who else has or	had access	Des	Describe the contents			Do you still
		dress (Number, Street, City, State and ZIP Code)		to it? Address (Number, State and ZIP Code)		200	,,,,,,			have it?
Pai	t 9:	Identify Property You Hold or Control	l for s	Someone Else						
23.		you hold or control any property that so someone.	omeo	ne else owns? Inc	lude any proper	ty yo	u borr	owed from, are storing	g for,	or hold in trust
	_	N.								
		No Yes. Fill in the details.								
				Where is the pre	manti (2	Dag	ariba :	the property		Value
		vner's Name Idress (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		Des	scribe	the property		Value
Pai	t 10:	Give Details About Environmental Inf	iorma	ation						
For	the	purpose of Part 10, the following definit	ions	apply:						
	tox	vironmental law means any federal, state ic substances, wastes, or material into t ulations controlling the cleanup of these	the ai	r, land, soil, surfa	ce water, ground					
		e means any location, facility, or propert own, operate, or utilize it, including disp	-		environmental I	aw, v	wheth	er you now own, opera	ate, o	r utilize it or used
		zardous material means anything an env ardous material, pollutant, contaminant			as a hazardous	was	ste, ha	zardous substance, to	xic s	ubstance,
Rep	ort a	all notices, releases, and proceedings th	at yo	ou know about, reg	gardless of when	the	y occu	ırred.		
24.	Has	s any governmental unit notified you tha	ıt you	ı may be liable or _l	ootentially liable	und	er or ii	n violation of an enviro	nme	ntal law?
		No Yes. Fill in the details.								
				Cavannasatal	m i4		Emrele -	nmental law !f		Date of mating
		Ime of site Idress (Number, Street, City, State and ZIP Code)		Governmental u Address (Number, ZIP Code)			know	onmental law, if you it		Date of notice

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	otor 1 otor 2	Eric Joseph Molitor Chelsee Renae Molitor		Case	e number (ii	f known)		
25.	Have	you notified any governmental unit of	any release of hazardous material?					
		lo ′es. Fill in the details.						
		e of site ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environme now it	ntal law, if you	Date of notice	
26.	Have	you been a party in any judicial or adı	ministrative proceeding under any envi	ronme	ental law?	Include settlements	and orders.	
		No Yes. Fill in the details.						
		: Title : Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	re of the o	ease	Status of the case	
Par	t 11:	Give Details About Your Business or	Connections to Any Business					
27.	Withi	n 4 years before you filed for bankrup	tcy, did you own a business or have an	y of th	he followii	ng connections to any	/ business?	
	ı	A sole proprietor or self-employed	in a trade, profession, or other activity, either full-time or part-time					
		☐ A member of a limited liability comp	pany (LLC) or limited liability partnershi	ip (LL	P)			
		☐ A partner in a partnership						
	[☐ An officer, director, or managing ex	ecutive of a corporation					
	[lacksquare An owner of at least 5% of the votin	g or equity securities of a corporation					
		No. None of the above applies. Go to	Part 12.					
	– 1	es. Check all that apply above and fil	I in the details below for each business	S .				
	Busi Addr	ness Name	Describe the nature of the business			Identification numbe		
		er, Street, City, State and ZIP Code)	Name of accountant or bookkeeper			siness existed	number of frint.	
	410	<i>r-</i> Litor & More N. Lincoln St xville, IA 50138	lawn care		EIN: From-To	3156 May 2018- present	i	

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☐ Yes. Fill in the details below.

Name Address

(Number, Street, City, State and ZIP Code)

Date Issued

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Debtor 1	Eric Joseph Molitor			
Debtor 2	Chelsee Renae Molitor			Case number (if known)
	1a			
Part 12:	Sign Below			
I have rea	d the answers on this Statement of Financial A	ffairs an	nd any attachments, ar	nd I declare under penalty of perjury that the answers
				or obtaining money or property by fraud in connection
	nkruptcy case can result in fines up to \$250,000), or imp	risonment for up to 20	years, or both.
18 U.S.C.	§§ 152, 1341, 1519, and 3571.			
/s/ Eric .	Joseph Molitor	/s/ Ch	elsee Renae Molitor	•
Eric Jos	seph Molitor	Chelse	ee Renae Molitor	
Signatur	e of Debtor 1	Signate	ure of Debtor 2	
Date O	ctober 14, 2019	Date	October 14, 2019	
Did you a	ttach additional pages to Your Statement of Fir	nancial A	Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
■ No				
☐ Yes				
Did you p	ay or agree to pay someone who is not an attor	ney to h	nelp you fill out bankru	uptcy forms?
■ No				
☐ Yes. Na	ame of Person Attach the Bankruptcy Peti	tion Prep	parer's Notice, Declarati	on, and Signature (Official Form 119).

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Fill in this inform	nation to identify your								
Debtor 1	Eric Joseph Molit								
	First Name	Middle Name	Last Name						
Debtor 2 Chelsee Renae Molitor									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA						
Case number				☐ Check if this is a amended filing	an				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	Eric Joseph Molitor Chelsee Renae Molitor	Case number (if known)	
name:		Retain the property and redeem it.	☐ Yes
Descrip	ption of	☐ Retain the property and enter into a Reaffirmation Agreement.	
propert		☐ Retain the property and [explain]:	
securin	ng debt:		_
Part 2:	List Your Unexpired Personal Property	Leases	
in the info	ormation below. Do not list real estate le	ou listed in Schedule G: Executory Contracts and Unexpired eases. Unexpired leases are leases that are still in effect; the release if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property lease	es	Will the lease be assumed?
Lessor's r	name:		□ No
	on of leased		
Property:			☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r Description	name: on of leased		□ No
Property:			☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
-17			Li Tes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		_
r roporty.			☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Part 3:	Sign Below		
	_		sures a daht and any naraanal
	that is subject to an unexpired lease.	icated my intention about any property of my estate that sec	cures a dept and any personal
X /s/ E	Eric Joseph Molitor	X /s/ Chelsee Renae Molitor	
	Joseph Molitor	Chelsee Renae Molitor	
Sign	ature of Debtor 1	Signature of Debtor 2	
Date	October 14, 2019	Date October 14, 2019	

Official Form 108

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-02411-als7 Doc 1 Filed 10/14/19 Entered 10/14/19 17:58:17 Desc Main Document Page 54 of 58

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Iowa

In	re Chelsee Renae Molitor		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	NSATION OF ATTOR	RNEY FOR DE	CRTOR(S)			
1.				, ,			
1.	compensation paid to me within one year before the filin	suant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that appensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	1,000.00			
	Prior to the filing of this statement I have received		<u> </u>	1,000.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are mem	pers and associates of my law fi	rm.		
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national control of the agreement.				L		
5.	In return for the above-disclosed fee, I have agreed to re	return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, stat c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Exemption planning; filing of reaffirmat 	tement of affairs and plan which ors and confirmation hearing, an	may be required; d any adjourned hea				
б.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis- any other adversary proceeding.			es, relief from stay actions	or		
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of an sbankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in			
_	October 14, 2019	/s/ Michael L. Jan					
	Date	Michael L. Jankin Signature of Attorne					
		Jankins Law Firm	Ì				
		700 2nd Ave. Suit					
		Des Moines, IA 50 515-255-1855 Fa					
		mikej572@hotma					
		Name of law firm					

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United States Bankruptcy Court Southern District of Iowa

In re	Eric Joseph Molitor Chelsee Renae Molitor		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF MASTER ADDRESS LIST ON PAPER (CREDITOR MATRIX)

I (we) declare under penalty of perjury that I (we) have read the attached Master Address List (creditor matrix), consisting of <u>3</u> pages, and that it is true and correct to the best of my (our) knowledge, information, and belief.

Date:	October 14, 2019	/s/ Eric Joseph Molitor	
		Eric Joseph Molitor	
		Signature of Debtor	
Date:	October 14, 2019	/s/ Chelsee Renae Molitor	
		Chelsee Renae Molitor	
		Signature of Debtor	

VER_MTRX (Rev. 04/00)

AAA Collections PO Box 881 Sioux Falls, SD 57101

Abbott, Osborn & Van Vliet PLC 974 73rd St, Suite 20 Des Moines, IA 50324

AFNI PO Box 3097 Bloomington, IL 61702

Brightwater Capital 850 Concourse Pkwy S Ste 120 Maitland, FL 32751

City of Des Moines PO Box 511 Des Moines, IA 50302

Community First Credit Union PO Box 737 Ottumwa, IA 52501

Credit Protection Association PO Box 802068 Dallas, TX 75380

Des Moines River Physicians Attn #21197Y PO Box 14000 Belfast, ME 04915

Dish Network PO Box 94063 Palatine, IL 60094

First National Bank of Omaha PO Box 2557 Omaha, NE 68103

GM Financial PO Box 183834 Arlington, TX 76096

H & R Accounts PO Box 672 Moline, IL 61266

I.C. Systems Inc PO Box 64378 Saint Paul, MN 55164 Knoxville Fire Dept PO Box 747 Wheeling, IL 60090

Kohls PO Box 2983 Milwaukee, WI 53201

Link Revenue Resources LLC 4891 Ronson Ct San Diego, CA 92111

LVNV Funding PO Box 10497 Greenville, SC 29603

Mediacom 3306 E. Main St Knoxville, IA 50138

Mercy Medical Center 1111 6th Ave Des Moines, IA 50314

Messerli & Kramer PA 3033 Campus Dr, Suite 250 Plymouth, MN 55441

Midland Funding PO Box 301030 Los Angeles, CA 90030

Nebraska Furniture Mart PO Box 2335 Omaha, NE 68103

Pella Regional Health Care 404 Jefferson St Pella, IA 50219

Pella Regional Health Clinics 405 Monroe St Pella, IA 50219

Portfolio Recovery Associates PO Box 12914 Norfolk, VA 23541

Professional Service Bureau PO Box 548 Anoka, MN 55303

Radius Global Solutions PO Box 390846 Minneapolis, MN 55439 Receivables Performance Management LLC PO Box 1548
Lynnwood, WA 98046

St Anthony Regional Hospital 10604 Justin Dr Urbandale, IA 50322

Target Card Services PO Box 660170 Dallas, TX 75266

The Bank of Missouri PO Box 4499 Beaverton, OR 97076

University of Iowa Hospitals & Clinics 2100 University Capitol Centre Iowa City, IA 52242

Windstream Attn Support Serv 1720 Galeria Charlotte, NC 28270